



PART B - FEE(S) TRANSMITTAL

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7590

04/22/2003

N. PAUL FRIEDERICHS
ANGENEHM LAW FIRM LTD
P.O. BOX 48755
COON RAPIDS, MN 55448

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Jill A. Friederichs

(Depositor's name)

Jill A. Friederichs

(Signature)

07/02-2003

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/828,330	03/28/1997	WILLIAM D. MORGAN	1-852-002	4766

TITLE OF INVENTION: INSULATED REMOVABLE POND COVER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650	\$0	\$650	07/22/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
CANFIELD, ROBERT	3635	052-023000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Angenehm Law Firm
2. N. Paul Friederichs
3. _____

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 1

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501143 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

N. Paul Friederichs 7/2/03
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PTOL-85 (REV. 04-02) Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

CERTIFICATE OF MAILING, FIRST CLASS MAIL

I, the undersigned, do hereby certify the following items were deposited as First Class Mail, postage prepaid, in an envelope addressed to Assistant Commissioner of Patents, PO Box 1450, Mail Stop ISSUE FEE, Alexandria VA 22313-1450 on this 2nd day of July, 2003.



- 1..Issue Fee Transmittal
- 2..Check 4543 for \$653.00 for payment of
 - a..Issue fee of \$ 650.00
 - b..Advance copy of patent at \$3.00
- 3..Postcard

Jill A. Friederichs
Jill A. Friederichs

July 2, 2003
Date

Applicant: William D. Morgan
Title: INSULATED REMOVABLE POND COVER
Serial No.: 08/828,330
Filed: March 28, 1997
Docket No.: I852-002-PAT